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Bib Data Sheet

CONFIRMATION NO. 6473

SERIAL NUMBER 10/798,543	FILING DATE 03/12/2004  RULE	CLASS 210	GROUP ART UNIT 1724	ATTORNEY DOCKET NO. 1397										
<b>APPLICANTS</b>  Martin F. Ticknor, Whitney Point, NY;														
** CONTINUING DATA ***** <i>NONE</i>														
** FOREIGN APPLICATIONS ***** <i>NONE</i>														
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 05/26/2004														
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; border-bottom: 1px solid black;">           Foreign Priority claimed  <input type="checkbox"/> yes <input checked="" type="checkbox"/> no            35 USC 119 (a-d) conditions met  <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after         </td> <td style="width: 20%; border-bottom: 1px solid black; text-align: center;">           STATE OR COUNTRY NY         </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;">           SHEETS DRAWING 5         </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;">           TOTAL CLAIMS 14         </td> <td style="width: 20%; border-bottom: 1px solid black; text-align: center;">           INDEPENDENT CLAIMS 1         </td> </tr> <tr> <td style="border-bottom: 1px solid black;">           Verified and Acknowledged  <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <i>[Signature]</i>              Examiner's Signature           </div> <div style="text-align: center;">             Initials           </div> </div> </td> <td colspan="4"></td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	STATE OR COUNTRY NY	SHEETS DRAWING 5	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 1	Verified and Acknowledged <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <i>[Signature]</i>              Examiner's Signature           </div> <div style="text-align: center;">             Initials           </div> </div>				
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<b>ADDRESS</b> Law Offices of John D. Gugliotta, PE, Esq. 202 Delaware Building 137 South Main Street Akron, OH 44308														
<b>TITLE</b> Rainwater collection apparatus and pumping system														
FILING FEE  RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> </table>		<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____					
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